FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| 1433 | 535 | _ | | | | | | | |
|-----------------|----------------|---|--|--|--|--|--|--|--|
| OMB APPROVAL | | | | | | | | | |
| OMB Number: | 3235-0076 | | | | | | | | |
| Expires: | April 30, 2008 | | | | | | | | |
| Estimated avera | ge burden | | | | | | | | |

| hours per response 16 | | | | | | | | | |
|-----------------------|---------|--|--|--|--|--|--|--|--|
| SEC US | SE ONLY | | | | | | | | |
| Prefix | Serial | | | | | | | | |
| DATE R | ECEIVED | | | | | | | | |

| Name of Offering (check if this is an amendment and name has changed, and indicate change.) MDI FX. LP | |
|---|---|
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: Amendment | ULOE SEC |
| A. BASIC IDENTIFICATION DATA | مسنم |
| 1. Enter the information requested about the issuer | - Conon |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) | APR 22 7008 |
| MDI FX, LP | |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Number (Intermite Orica Code) |
| 160 Greentree Drive, Suite 101, Dover, Delaware, 19904 | 800-634-4915 1,0 4 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) | Telephone Number (Including Area Code) |
| Brief Description of Business | |
| Forex Fund | PROCESSED |
| Type of Business Organization | lease specify): APR 2 8 2008 |
| business trust limited partnership, to be formed | AFR 202000 |
| Actual or Estimated Date of Incorporation or Organization: Month Year | · · · · · · · · · · · · · · · · · · · |
| CN for Canada; FN for other foreign jurisdiction) | DE |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

| A. BASIC IDENTIFICATION DATA | | | | | | | | | | | |
|--|------------------------------------|--|--|--|--|--|--|--|--|--|--|
| Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. | | | | | | | | | | | |
| | General and/or Managing Partner | | | | | | | | | | |
| MarcRyan Diversified Investments Corp. Full Name (Last name first, if individual) | | | | | | | | | | | |
| 1092 Shimmering Sand Drive, Ocoee, Florida, 34761 Business or Residence Address (Number and Street, City, State, Zip Code) | | | | | | | | | | | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner | | | | | | | | | | |
| Marc Bromfield Full Name (Last name first, if individual) | | | | | | | | | | | |
| 1092 Shimmering Sand Drive, Ocoee, Florida, 34761 | <u></u> | | | | | | | | | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | | | | | | | | | | | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner | | | | | | | | | | |
| Full Name (Last name first, if individual) | | | | | | | | | | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | | | | | | | | | | | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner | | | | | | | | | | |
| Full Name (Last name first, if individual) | | | | | | | | | | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | | | | | | | | | | | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner | | | | | | | | | | |
| Full Name (Last name first, if individual) | | | | | | | | | | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | | | | | | | | | | | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner | | | | | | | | | | |
| Full Name (Last name first, if individual) | | | | | | | | | | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | | | | | | | | | | | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director | General and/or Managing Partner | | | | | | | | | | |
| Full Name (Last name first, if individual) | | | | | | | | | | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | | | | | | | | | | | |
| | | | | | | | | | | | |

| | B. INFORMATION ABOUT OFFERING | | | | | | | | | | | | |
|------------|---|-------------|-------------------------------|-------------|--------------|---------------|-------------|-------------|-------------|-----------------------------------|-------------|---------------------------------------|----------|
| 1. | Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | | | | | Yes | No | | |
| 4. | Answer also in Appendix, Column 2, if filing under ULOE. | | | | | | | | | | | | |
| 2. | What is | the minim | um investn | | | • • | | _ | | | | \$ 10,00 | 0.00 |
| | | | | | | | | | | | | Yes | No |
| 3. | Does the | e offering | permit join | t ownership | p of a sing | le unit? | | | | | | \boxtimes | |
| 4. | | | tion request ilar remune | | - | | | | | | | | |
| | | | mar remuner sted is an ass | | | • | | | | | _ | | |
| | | | ame of the b | | | | | | | ciated pers | ons of such | | |
| <u> </u> | | | · · · · · · · · · | | mormatie | on for that | OTOKET OF C | | • | | | | |
| N/A | Full Name (Last name first, if individual) | | | | | | | | | | | | |
| | | Residence | Address (N | umber and | Street, Ci | ty, State, Z | Cip Code) | | | | | · · · · · · · · · · · · · · · · · · · | |
| N/A | | | | | | _ | | <u>.</u> | | | | | |
| | | ociated Bi | roker or Dea | aler | | | | | | | | | |
| N/A | | ich Person | Listed Has | Solicited | or Intenda | to Solicit | Purchauara | | | | | | |
| Sid | | | i Listed Has s" or check i | | | | | | | | | | l States |
| | (Check | | , or check i | | | | | | | | | | |
| | AL | AK | AZ | AR | CA | со | СТ | DE | DC | FL | GA | HI | ID |
| | | [N] | [IA] | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT | NE | NV | NH | NJ | NM | NY | NC VA | WA | W V | OK | OR WY | PA |
| | RI | [SC] | SD | TN | TX | UT | VT | VA | WA. | | | <u> </u> | <u> </u> |
| Ful | l Name (| Last name | first, if indi | vidual) | | | | | | | | | |
| N/A | | B 43 | 4.1. | | 1.0. = | | | | | | | | |
| Bus N/A | | Kesidence | Address (N | lumber and | i Street, Ci | ity, State, 2 | Zip Code) | | | | | | |
| | | sociated B | roker or De | aler | | | | | | | | | |
| N/A | ١ | | | | | | | | | ================================= | | | |
| Sta | tes in Wh | ich Persor | n Listed Has | Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| | (Check | "All State: | s" or check | indiviđual | States) | | | | | | *********** | Al | l States |
| | AL | AK | AZ | AR | CA | CO | СТ | DE | DC | FL | GA | HI | ID |
| | IL | IN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT | NE | NV | NH | NJ | NM | NY | NC | ND | ОН | OK | OR | PA |
| | RI | SC | SD | TN | TX | UT | VT | VA | WA | WV | WI | WY | PR |
| Ful | l Name (| Last name | first, if indi | ividual) | | | | | | | | <u> </u> | |
| N/A | ` | | | | | | | | | | | | |
| Bus | siness or | Residence | Address (N | lumber and | Street, C | ity, State, | Zip Code) | | | | | | . — |
| N/A | | oninted D | roker or De | nlas | | | | | | | | | |
| Nar N/A | | sociated Bi | OKET OF DE | aici | | | | | | | | | |
| | | ich Persor | Listed Has | Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| | States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) | | | | | | | | ☐ AI | I States | | | |
| | AL AK AZ AR CA CO CT DE DC FL GA | | | | | | | | н | ID | | | |
| | IL | IN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT | NE | NV | NH | NJ | NM | NY | NC | ND | ОН | ОК | OR | PA |
| | RI | SC | SD | TN | TX | UT | VT | VA | WA | wv | WI | WY | PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and | | | | |
|----|--|-----------------------------|-------------|----------|------------------------------------|
| | Type of Security | Aggregate Offering Price | 1 | | nt Already Sold |
| | | 0.00 | • | | 0.00 |
| | Debt\$ | | \$_ | | 0.00 |
| | Equity | 0.00 | 3 _ | | 0.00 |
| | Convertible Securities (including warrants) | 0.00 | \$ | _ | 0.00 |
| | Partnership Interests\$ | unlimited | \$ | | 0.00 |
| | Other (Specify) | 0.00 | \$ | | 0.00 |
| | Total\$ | | \$ | | 0.00 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | _ | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | Number Investors | | Doll | ggregate ar Amount Purchases |
| | Accredited Investors | 0 | \$ | <u></u> | 0.00 |
| | Non-accredited Investors | 0 | \$ | <u> </u> | 0.00 |
| | Total (for filings under Rule 504 only) | 0 | \$ | S | 0.00 |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | | | | |
| | Type of Offering | Type of Security | | Dolla | ar Amount Sold |
| | Rule 505 | | <u>0</u> \$ | <u>;</u> | 0.00 |
| | Regulation A | (| 2 \$ | <u></u> | 0.00 |
| | Rule 504 | | 2 \$ | · | 0.00 |
| | Total | | 2 \$ | | 0.00 |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | | | |
| | Transfer Agent's Fees | | \$ | | 0.00 |
| | Printing and Engraving Costs | | \$ | | 0.00 |
| | Legal Fees | | \$ | | 0.00 |
| | Accounting Fees | | \$ | | 0.00 |
| | Engineering Fees | | \$ | | 0.00 |
| | Sales Commissions (specify finders' fees separately) | | \$ | | 0.00 |
| | Other Expenses (identify) | | \$ | | 0.00 |
| | Total | | \$ | | 0.00 |
| | | | _ | | |

| | C. OFFERING PRICE, NU | MBER OF INVESTORS, EXPENSES AND USE O | F PRO | CEEDS | | |
|--------------|--|---|-----------|-------------------------|-----------|-----------------------|
| | b. Enter the difference between the aggregate off and total expenses furnished in response to Part C-proceeds to the issuer." | -Question 4.a. This difference is the "adjusted gro | oss | | \$ | 0.00 |
| 5. | Indicate below the amount of the adjusted gross particle and of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Particle and Part | ny purpose is not known, furnish an estimate a of the payments listed must equal the adjusted gro | nd | | | |
| | | | | Payments to | | |
| | | | | Officers, | | |
| | | | | Directors, & Affiliates | | Payments to Others |
| | Salaries and fees | | 🗆 s | | <u></u> | 0.00 |
| | Purchase of real estate | | ш. | | □ ¢ | 0.00 |
| | | | ∟.₃. | 0.00 | | 0.00 |
| | Purchase, rental or leasing and installation of mand equipment | | s | 0.00 | ∏s | 0.00 |
| | Construction or leasing of plant buildings and for | acilities | □s | 0.00 | □ s | 0.00 |
| | Acquisition of other businesses (including the va | | | | _ | |
| | offering that may be used in exchange for the as | sets or securities of another | | | | |
| | issuer pursuant to a merger) | | 🗌 s | 0.00 | \$ | 0.00 |
| | Repayment of indebtedness | | 🔲 \$ | 0.00 | □ \$ | 0.00 |
| | Working capital | | []\$ | 0.00 | \$ | 0.00 |
| | Other (specify): | | \$ | 0.00 | S | 0.00 |
| | | | | | | |
| | | | []\$ | 0.00 | \$ | 0.00 |
| | Column Totals | | 🗀 s | 0.00 | \$ | 0.00 |
| | Total Payments Listed (column totals added) | | | □ s | | 0.00 |
| Г | | D. FEDERAL SIGNATURE | | | | |
| _ | | | | | | |
| sig | e issuer has duly caused this notice to be signed by t nature constitutes an undertaking by the issuer to fi information furnished by the issuer to any non-ac | urnish to the U.S. Securities and Exchange Com- | mission | , upon writter | | - |
| Ss | uer (Print or Type) | Signature, / , / | Date | : | | |
|) <i>e t</i> | NIEV IB | 1 ShuRUM | 1 | 14-01- | - 08 | 3 |
| | DI FX, LP me of Signer (Print or Type) | Title of Signer (Print or Type) | | • | | |
| | | | | _ | | |
| Ma | rc Bromfield | Managing Member of MarcRyan Diversified Inves | tments (| Согр. | | |

ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | | E. STATE SIGNATURE | | |
|----------|---|---|---|-----------|
| 1. | | R 230.262 presently subject to any of the disqua | | No ⊠ |
| | | See Appendix, Column 5, for state respon | ase. | |
| 2. | The undersigned issuer hereby un D (17 CFR 239.500) at such tim | dertakes to furnish to any state administrator of ances as required by state law. | ny state in which this notice is filed a notice | on Form |
| 3. | The undersigned issuer hereby u issuer to offerees. | andertakes to furnish to the state administrators, | upon written request, information furnish | ed by the |
| 4. | limited Offering Exemption (UL | ts that the issuer is familiar with the conditions OE) of the state in which this notice is filed and n of establishing that these conditions have been | understands that the issuer claiming the av | |
| | uer has read this notification and kno thorized person. | ows the contents to be true and has duly caused thi | s notice to be signed on its behalf by the uno | dersigned |
| Issuer (| Print or Type) | Signature Struckly | Date 04 - 01 - 08 | |
| | Print or Type) | Title (Print or Type) | | |
| Marc Br | omfield | Managing Mamber of MamPyan Div | proified Investments Com | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| | | | | APPI | ENDIX | | | | |
|-------|--------------------------------|---|--|--------------------------------------|-----------|--|--------|---|----|
| 1 | Intend to non-a investor | 2 to sell ccredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | amount pi | 4 f investor and urchased in State t C-Item 2) | | 5 Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item 1) | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| AL | × | | Rule 506/ Unlimited | | | | | | X |
| AK | X | | Rule 506 /Unlimited | | | | | | × |
| AZ | × | | Rule 506/ Unlimited | | | | | | × |
| AR | × | | Rule 506/ Unlimited | | | | | | X |
| CA | × | | Rule 506/ Unlimited | | | | | | X |
| СО | × | | Rule 506/ Unlimited | | | <u> </u> | | | × |
| СТ | X | | Rule 506/ Unlimited | | | | | | X |
| DE | × | | Rule 506/ Unlimited | | | | | | × |
| DC | X | | Rule 506/ Unlimited | | | | | | X |
| FL | X | | Rule 506/ Unlimited | | | | | | X |
| GA | X | | Rule 506/ Unlimited | | | | | | × |
| ні | × | | Rule 506/ Unlimited | | | | | | X |
| ID | × | | Rule 506/ Unlimited | | | | | | X |
| IL | × | | Rule 506/ Unlimited | | | | , | | × |
| IN | X | | Rule 506/ Unlimited | | · | | | | X |
| IA | × | | Rule 506/ Unlimited | | | | | | X |
| KS | X | | Rule 506/ Unlimited | | | | | | × |
| KY | X | | Rule 506/ Unlimited | | | | | | × |
| LA | × | | Rule 506/ Unlimited | | | | | | X |
| МЕ | × | | Rule 506/ Unlimited | | | | | | × |
| MD | × | | Rule 506/ Unlimited | | | | | | × |
| МА | × | | Rule 506/ Unlimited | | | | | | X |
| МІ | × | | Rule 506/ Unlimited | | | | | | × |
| MN | × | | Rule 506/ Unlimited | | | | | | × |
| MS | X | | Rule 506/ Unlimited | | | | | | X |

| | | | | APPE | NDIX | | | | |
|-------|--------------------------------|---------------------------------|---|--------------------------------------|--------|--|----------|---|---|
| 1 | Intend to non-a investor | 2 I to sell accredited in State | Type of security and aggregate offering price offered in state (Part C-Item 1) 4 Type of investor and amount purchased in State (Part C-Item 2) | | | | | under St (if yes explan waiver | lification ate ULOE, attach ation of granted) |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| мо | X | | Rule 506/ Unlimited | | | | | | × |
| мт | X | | Rule 506/ Unlimited | | | | | | × |
| NE | X | | Rule 506/ Unlimited | | | | | | × |
| NV | × | İ | Rule 506/ Unlimited | | | | | | X |
| NH | × | | Rule 506/ Unlimited | | | | | | X |
| NJ | × | | Rule 506/ Unlimited | | | | <u> </u> | | X |
| NM | X | | Rule 506/ Unlimited | | | | | | X |
| NY | × | | Rule 506/ Unlimited | | i | | | | X |
| NC | × | | Rule 506/ Unlimited | | | : | | | × |
| ND | X | | Rule 506/ Unlimited | | - | | | | X |
| ОН | × | | Rule 506/ Unlimited | | | | | | × |
| ок | × | | Rule 506/ Unlimited | | | | | | × |
| OR | X | | Rule 506/ Unlimited | | | | | | X |
| PA | × | | Rule 506/ Unlimited | | | | | | X |
| RI | × | | Rule 506/ Unlimited | | | | | | × |
| SC | X | | Rule 506/ Unlimited | | | | | <u> </u> | X |
| SD | × | | Rule 506/ Unlimited | : | | | | | X |
| TN | × | | Rule 506/ Unlimited | | | | | | X |
| TX | X | | Rule 506/ Unlimited | | | | | | X |
| UT | × | | Rule 506/ Unlimited | | | | | · | X |
| VT | X | | Rule 506/ Unlimited | | | | | | × |
| VA | X | | Rule 506/ Unlimited | | | | | | X |
| WA | X | | Rule 506/ Unlimited | | | | | | × |
| wv | × | | Rule 506/ Unlimited | | | | | | × |
| wı | × | | Rule 506/ Unlimited | | | | | | X |

| | | | | APPE | ENDIX | | | | |
|-------|----------------------|--|--|--------------------------------------|--|------------------------------------|--------|-----|----|
| 1 | to non-a investor | 2 If to sell accredited as in State | Type of security and aggregate offering price offered in state | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | | |
| State | Yes | No | (Part C-Item 1) | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| WY | × | - | Rule 506/ Unlimited | | | | | | X |
| PR | × | | Rule 506/ Unlimited | | | | - | | × |

END